

FRIENDS OF MUSIC REQUEST FOR FINANCIAL SUPPORT

Name: _____

Address: _____ Phone: _____

_____ Email: _____

Check the all the appropriate lines:

- | | |
|--|---|
| <input type="checkbox"/> Ensemble Support | <input type="checkbox"/> Full-time Faculty |
| <input type="checkbox"/> Student Support | <input type="checkbox"/> Part-time Faculty |
| <input type="checkbox"/> Faculty Grant | <input type="checkbox"/> Full-time Student |
| <input type="checkbox"/> Faculty Equipment | <input type="checkbox"/> Part-time Student |
| | <input type="checkbox"/> Under-graduate Student |
| | <input type="checkbox"/> Graduate Student |

What is the total amount of the funds you are requesting? \$ _____

Will you receive funds from other sources? Yes No

Check Funding Period

(requests should be submitted 30 days prior to beginning of funding period; see note below)

- November 1- January 31 [application deadline - October 1]
 February 1- April 30 [application deadline - January 1]
 May 1 - October 31 [application deadline - April 1]

These deadlines are important for proper consideration of your requests. In case of unforeseen needs which these deadlines will not accommodate, please see the President of FOM.

please return this form to Ben Arnold,
UK School of Music
105-C Fine Arts Building
Lexington, KY 40506-0022

School of Music Director: _____ Major Professor: _____

1. Describe the nature of this activity, event, or project. (If there is an official invitation to participate, please attach a copy.)

2. Provide an itemized listing of expected expenses detailing funds requests from FoM.

3. Describe the benefits that you will receive from participation in this project.

4. Describe the benefits that the School of Music will receive from your participation in this project.

5. If this is a student proposal: comment on the worthiness of it.